

Hospital Quality Incentive Program

Proposals for
Calendar Year 2022 Performance

- Goal
 - Provide an overview of and share proposed changes to PA Medicaid Hospital Quality Incentive Program (HQIP) for Calendar Year (CY) 2022 performance
- Agenda
 - Opioid Use Disorder (OUD) in the Emergency Department (ED)
 - Potentially Avoidable Admissions (PAA)
 - Racial and Ethnic Health Disparities (REHD)

- No changes to the current program
- Based on a modified HEDIS® specification of follow up within 7 days for opioid treatment after a visit to the emergency department (ED) for OUD related condition
- Methodology remains unchanged for both:
 - Benchmark achievement
 - Incremental improvement
- Total funding available remains at \$35 million

- DHS website
 - Program Explanation and
 - Results from prior years

<https://www.dhs.pa.gov/providers/Providers/Pages/Hospital-Assessment-Initiative-.aspx>

Hospital Quality Improvement Program Emergency Department Opioid Use Disorder

- [FY 19-20 Hospital Quality Improvement Program Opioid Use Disorder Treatment Statewide Results](#)
- [Hospital Quality Improvement Program Frequently Asked Questions](#)
- [Hospital Quality Improvement Program Follow-up treatment after ED visit for Opioid Use Disorder](#)
- [Opioid Use Disorder Emergency Department Initiative Performance Measure](#)
- [Hospital Quality Improvement Program Opioid Use Disorder Treatment Pathway Results](#)

- Potentially Preventable Admissions (PPA)
 - Current program focused on reducing preventable admissions
 - All acute care general hospitals are eligible
 - In place since CY 2016 performance
 - Uses 3M™ software to identify PPAs
 - CY 2021 is the fifth and final performance period

- Change to Potentially Avoidable Admissions (PAA)
 - Subject to CMS approval
 - All acute care general hospitals are eligible
 - CY 2022 Year 1 performance
 - Uses Agency for Healthcare Research and Quality (AHRQ)
 - AHRQ is publicly available
 - Focused on the same PQIs and PDIs in Physical Health HealthChoices
 - Aligns with Act 40 of 2018 and each hospital's detailed report
 - CY 2018 report released to hospitals July 27, 2021
 - Total funds available for PAA remain at \$45 million

PQI ≡ Prevention Quality Indicator; PDI ≡ Pediatric Quality Indicator



**CY 2016 - CY 2021
Performance**

**Potentially Preventable
Admissions (PPA)**

**3M™ Population-focused
Preventables Software**

- Benchmark Achievement
- Incremental Improvement

**Subject to CMS Approval
CY 2022 Performance**

Potentially **Avoidable
Admissions (**PAA**)**

**Agency for Healthcare
Research and Quality
(AHRQ)**

- Benchmark Achievement
- Incremental Improvement

- DHS website

<https://www.dhs.pa.gov/providers/Providers/Pages/Hospital-Assessment-Initiative-.aspx>

- Potentially Avoidable Admissions (PAA)
 - DHS intends to add materials as available

- Potentially Preventable Admissions



PA Hospital Quality Incentive Potentially Preventable Admission Payment

- [FY 19-20 Hospital Quality Incentive Statewide Results](#)
- [FY 19-20 HQIP Narrative and Measures](#)
- [FY 18-19 Hospital Quality Incentive Statewide Results](#)
- [FY 17-18 Hospital Quality Incentive Statewide Results](#)
- [FY 17-18 Hospital Quality Incentive Q&A](#)
- [FY 17-18 Hospital Quality Incentive Performance Year Changes](#)
- [FY 16-17 Hospital Quality Incentive Statewide Results](#)
- [FY 16-17 Hospital Quality Incentive Q&A](#)
- [Hospital Quality Incentive Presentation](#)
- [3M Hospital Quality Incentive Program Presentation](#)
- [Hospital Quality Incentive Program APR-DRG Listing](#)

- New HQIP for Performance Year (PY) 2022
 - Intended to address issues of racial and ethnic health disparities by incentivizing hospitals to recognize and provide the necessary services to deliver quality health care to racial and ethnic minority populations
- Subject to CMS approval
- All acute care general hospitals are eligible
- Subset of Potentially Avoidable Admission quality initiative
- Incentive only; no penalty
- Physical Health HealthChoices program

REHD Phases (subject to CMS approval)

Phase I

Hospitals attest to implementation of a Process Incentive Pathway (PIP)

details on next slide

PY 2022 & PY 2023



Phase II

Hospitals required to achieve performance standards

The REHD methodology will utilize a subset of the AHRQ PQIs and PDIs used in the PAA HQIP analyzed by racial and ethnic groups

PY 2023

PQI ≡ Prevention Quality Indicator

PDI ≡ Pediatric Quality Indicator

REHD Phase I (subject to CMS approval)



Process Incentive Pathway (PIP)	Year 1 – CY 2022	Year 2 – CY 2023	Aggregate Payment Amount
#1	<ul style="list-style-type: none"> Begin to implement Race, Ethnicity, and Language (REaL) Data Collection 	<ul style="list-style-type: none"> Identify disparities Develop an internal committee and work plan to begin addressing issues of racial and ethnic health disparities 	<p><u>Base amount</u></p> <ul style="list-style-type: none"> CY 2022 \$25 million CY 2023 \$25 million
#2	<ul style="list-style-type: none"> Begin to develop a social needs and social risk screening processes 	<ul style="list-style-type: none"> Develop a plan to address one identified need or risk that the hospital identified related to racial and ethnic health disparities through the screening process 	
#3 (Bonus Payment)	<ul style="list-style-type: none"> Develop a community advisory board consisting of internal and external stakeholders 	<ul style="list-style-type: none"> Conduct quarterly meetings with the community advisory board 	<p><u>Bonus amount</u></p> <ul style="list-style-type: none"> CY 2022 \$5 million CY 2023 \$5 million

REHD Phase I (subject to CMS approval)



Information and Timeline

Performance Year	Attestation Due Date	Statewide Amount	Target Payment Date to MCOs	State Fiscal Year of QCA* Funding
2022	April 15, 2022	\$30M	July 2022	2021-22
2023	April 14, 2023	\$30M	July 2023	2022-23

* QCA ≡ Quality Care Assessment

- CY 2022 will serve as the baseline for 2023 performance
- Each hospital's REHD statistic will be calculated uniformly
 - Note - Children's hospitals will be measured only on PDIs

$$\frac{\text{CY 2023 Number of Discharges from denominator with one of the selected PQI/PDI diagnoses on discharge}}{\text{CY 2023 Number of Discharges of Non-Hispanic African American and Hispanic/Latino (combined) PH-HC Members}} = \text{Performance Statistic}$$

- Hospital performance based on REHD performance statistic
 - Benchmark Achievement
 - Incremental Improvement

- Payment calculation methodology will mirror that utilized in the PPA/PAA
 - Benchmark Achievement

Benchmark Payout			
	Non-Children's Acute Care General Hospital		Children's Hospital
Percentile	25th	50th	50th
% Payout	100%	90%	100%

- Incremental Improvement

Incremental Improvement	Percent Payout
≥ 3 Percentage Point Improvement	100%
≥ 2 and < 3 Percentage Point Improvement	90%
≥ 1 and < 2 Percentage Point Improvement	80%
≥ 0.5 and < 1 Percentage Point Improvement	70%

Payment Information and Timeline

Target Payment Date to MCOs	Performance Year	Phase	Statewide Amount	State Fiscal Year of QCA* Funding
July 2022	2022	Phase I	\$30M	2021-22
July 2023	2023	Phase I	\$30M	2022-23
October 2024	2023	Phase II	\$30M	2023-24

*QCA ≡ Quality Care Assessment

- **DHS website**

<https://www.dhs.pa.gov/providers/Providers/Pages/Hospital-Assessment-Initiative-.aspx>

Hospital Quality Improvement Program Racial and Ethnic Health Disparities (REHD)

- [HQIP_REHD Measures](#)
- [HQIP_REHD Attestation Form](#)



Please direct questions and comments to:

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